

Wellness

Section Highlights

Residents Without Health Insurance 8.5%

Residents per Primary Care Physician 1,742

Young Child Deaths Down 11%

Overweight Students 2 in 5

Overweight Adults 2 in 3

Gap between Low-Income Residents Needing and Getting Mental Health Care
Smallest in 10 Years

A Success Story

Prescription opioid drug dependence, misuse, abuse, and drug related overdose deaths have become a public health emergency. The Inland Empire Opioid Crisis Coalition is one of San Bernardino County's responses to the opioid crisis. Members of the Coalition include representatives from hospitals in the region, the County Department of Behavioral Health, and the Hospital Association of Southern California. Since emergency departments are at the forefront of treating and curtailing the spread of this epidemic, the Coalition recently published, and is widely distributing, a toolkit to help emergency room doctors discuss options with patients needing treatment for pain. The toolkit also provides behavioral health, physician, and health plan support. The Coalition is in the process of developing a tool kit for primary care physicians.

Rate of Uninsured Drops 12 Percentage Points in Five Years

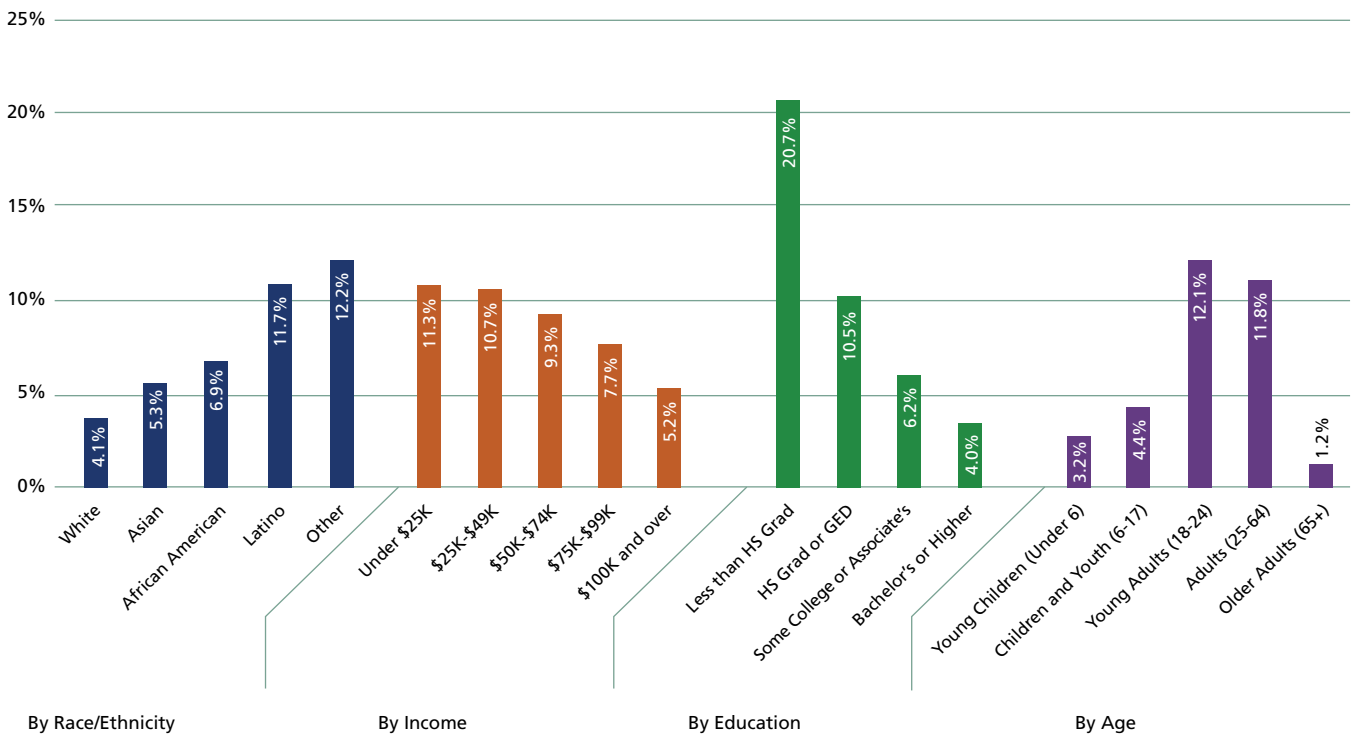
Individuals who have health insurance and a usual source of care are more likely to seek routine health care and take advantage of preventative health screening services than those without such coverage. The result is a healthier population and more cost-effective health care. Delaying or not receiving needed medical care may result in more serious illness, increased complications, and longer hospital stays. With the implementation of the Affordable Care Act (ACA), more people are receiving access to health care; however, a regional shortage of doctors, particularly primary care physicians, may restrict timely access to care. This indicator measures the percentage of residents without health insurance coverage, the number of residents per primary care physician, and whether residents have a usual source of care or delayed care. Also shown is Medi-Cal enrollment.

How is San Bernardino County Doing?

There has been a significant decline in the percentage of uninsured residents:

- In 2016, 8.5% of San Bernardino County residents were uninsured, a drop of 12 percentage points from 2012, when 20.6% of residents were uninsured.
- This is lower than the United States (8.6% uninsured) and all peer counties compared, except for San Diego and Orange counties (7.5% and 7.2% uninsured, respectively) and California overall (7.3%).
- Residents in the category “other” (which includes American Indian and Alaska Native alone, some other race alone, or two or more races) were the racial or ethnic group most likely to be uninsured (12.2%), followed by Latinos (11.7%).
- When broken out by household income, those with incomes in the lowest range (less than \$25,000) were the most likely to be uninsured (11.3%).
- 20.7% of those with less than a high school diploma were uninsured, compared with 4.0% of those with a college degree.
- At 12.1%, young adults (ages 18-24 years old) were the age group most likely to be uninsured.
- 4.4% of young children, under age six, were uninsured.

Uninsured by Race/Ethnicity, Income, Education and Age
San Bernardino County, 2016



Note: Asian includes Native Hawaiian/Pacific Islander. White is non-Hispanic. Latino is of any race. Educational attainment data is for the population age 25 and over.

Source: U.S. Census Bureau, American Community Survey, 1-Year Estimates (<http://factfinder2.census.gov>)

Compared to neighboring counties, fewer San Bernardino County residents have a usual place to go for medical care:

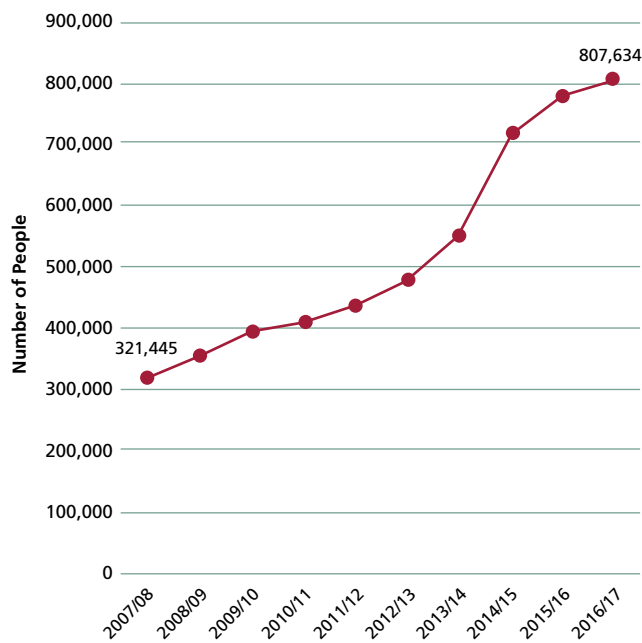
- According to the 2015 California Health Interview Survey (CHIS), 83.1% of people under age 65 had a usual place to go to when they were sick or needed health advice, a slightly lower proportion than California and all neighboring counties compared, except Orange County (81.9%).
- However, 8.8% of San Bernardino County residents under age 65 delayed or did not get the medical care that they needed, a better rate than the state and all neighboring counties compared.
- This is an improvement of three and a half percentage points since 2011, when 12.3% of San Bernardino County residents under age 65 delayed or did not get needed medical care.
- There are 1,742 people for each primary care physician in San Bernardino County, higher than the state and all neighboring counties compared, except Riverside County. The national target ratio (consisting of “top performers” in the top 10%) is 1,040 for each primary care physician.¹

Medi-Cal Enrollment in San Bernardino County

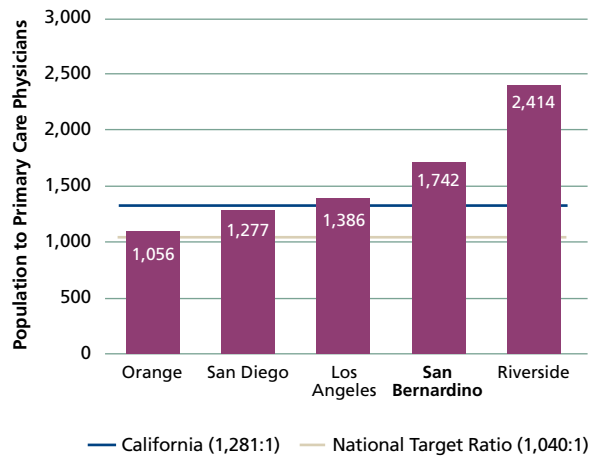
Medi-Cal, a health care program for certain low-income populations, has seen significant increases since the roll out of the Affordable Care Act, which expands eligibility and requires health insurance coverage.

- In 2017, Medi-Cal enrollment increased 3% from the previous year.
- In the 10-year period between 2008 and 2017, overall Medi-Cal enrollment more than doubled (151% increase).

Enrollment in Medi-Cal
San Bernardino County, 2008-2017

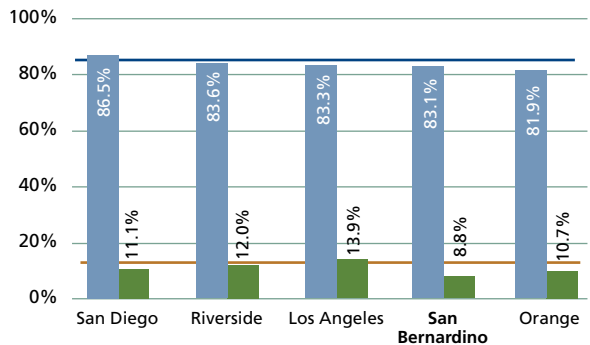


Number of Residents per Primary Care Physician
County Comparison, 2017



Source: County Health Rankings and Roadmaps (www.countyhealthrankings.org)

Health Care Access (Under Age 65)
County Comparison, 2015



Residents reporting they...

had a usual place to go for health care:



delayed/did not get care:



Source: California Health Interview Survey

Hospitals and Medical Facilities

There are 26 hospitals serving residents and visitors to San Bernardino County, including two trauma centers: Loma Linda University Medical Center and Arrowhead Regional Medical Center (ARMC). The ARMC operates three community Family Health Centers (FHCs) for primary care, and the only burn center serving San Bernardino, Riverside, Inyo and Mono counties.

Source: State of California, Office of Statewide Planning and Development OSHPD (<http://gis.oshpd.ca.gov/atlas/places/list-of-hospitals/county/san-bernardino>)

¹ Primary care physicians include practicing physicians under age 75 specializing in general practice medicine, family medicine, internal medicine, and pediatrics.

Early Prenatal Care Rate Increases

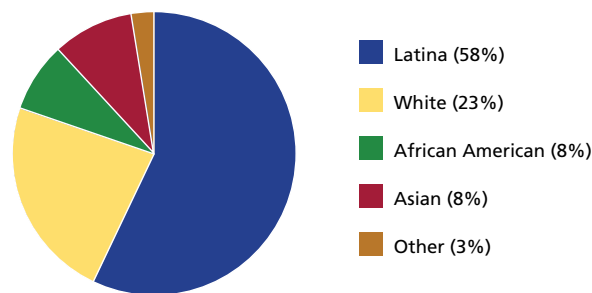
Increasing the number of women who receive early prenatal care (in the first trimester of pregnancy) can improve birth outcomes and lower health care costs by reducing the likelihood of complications during pregnancy and childbirth. Babies born to mothers who do not get prenatal care are three times more likely to have a low birth weight and five times more likely to die than those born to mothers who do get care. Early prenatal care allows women and their health care providers to identify and, when possible, treat health problems and correct health-compromising behaviors that can be particularly damaging during the initial stages of fetal development.¹ This indicator tracks early prenatal care rates for San Bernardino County, including detail by race and ethnicity.

How is San Bernardino County Doing?

In 2015, early prenatal care rates increased:

- Early prenatal care for San Bernardino County mothers rose 1.2 percentage points to 83.6% in 2015 – above the national Healthy People 2020 objective of 77.9%.
- Levels of early prenatal care improved for all ethnicities.
- White mothers have the highest early prenatal care rate (84.8%), followed by Latina mothers (84.5%).
- The percentage of Asian mothers receiving early prenatal care increased nearly two percentage points from 77.7% in 2014 to 79.5% in 2015.
- The majority of births in San Bernardino County are to Latina mothers (58%), followed by White mothers (23%), and African American and Asian mothers (8% each).
- Over the past 10 years, the number of live births in San Bernardino County decreased 12%, from 34,675 live births in 2006 to 30,510 in 2015.

Live Births by Race and Ethnicity
San Bernardino County, 2015*

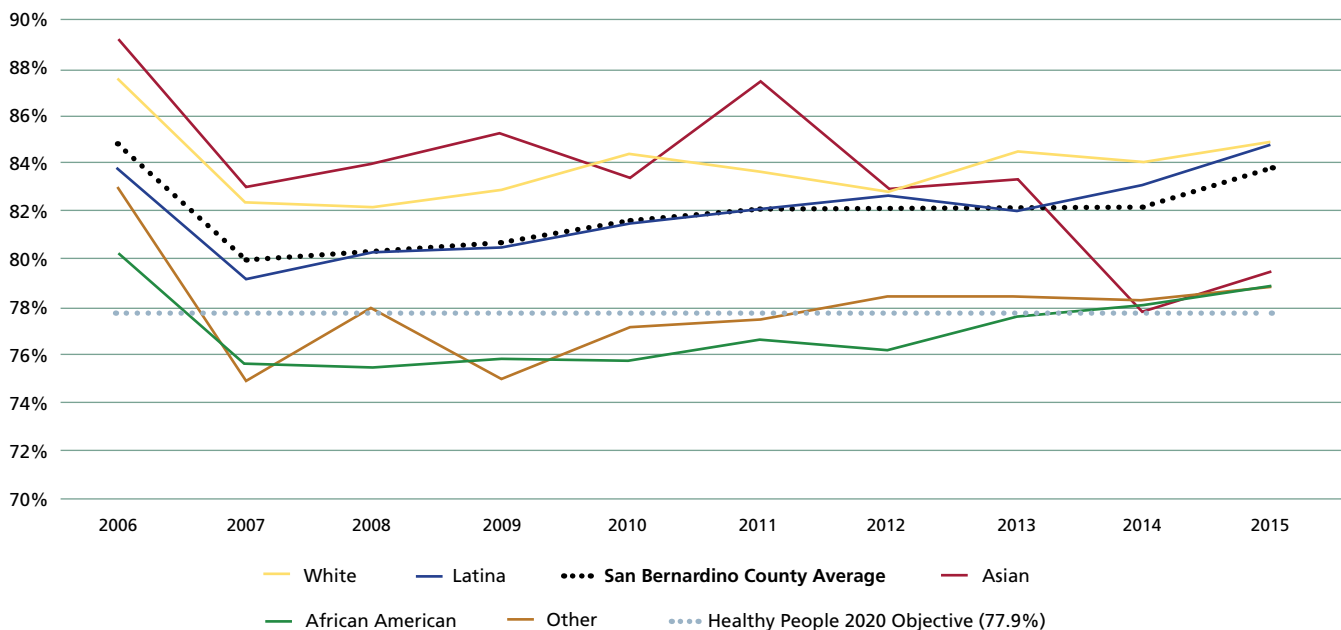


Note: Chart does not include 169 births with unknown race/ethnicity.
*2015 data are considered preliminary and should be interpreted with caution.
Source: County of San Bernardino, Department of Public Health

What is Healthy People 2020?

Healthy People 2020 is a national health promotion and disease prevention initiative that establishes national objectives to improve the health of all Americans, to eliminate disparities in health, and to increase the years and quality of healthy life.

Percentage of Mothers Receiving Early Prenatal Care by Race and Ethnicity
San Bernardino County, 2006-2015*



Note: The ethnic category “Latina” includes any race; the racial categories “White,” “Asian,” and “African American” are all non-Latina. “Asian” includes Asian and Pacific Islander. “Other” includes the categories of other, two or more races, and American Indian/Native Alaskan.
*2015 data are considered preliminary and should be interpreted with caution.

Source: County of San Bernardino, Department of Public Health

¹ Child Trends (<http://www.childtrends.org/?indicators=late-or-no-prenatal-care>)

Child Deaths Decline

Awareness of the leading causes of death for children can lead to intervention strategies to help prevent mortality. Many of these deaths are preventable through preconception health care, early and ongoing prenatal care, and outreach to parents and caregivers. This indicator measures the leading causes of death for infants less than one year old and children ages one through four in San Bernardino County.

How is San Bernardino County Doing?

In 2015, the overall death rate for children under five years of age in San Bernardino County decreased:

- The number of infant deaths decreased 11%, from 185 in 2014 to 165 in 2015.
- There was no change, however, among children ages one through four (30 deaths both in 2014 and 2015).
- The overall death rate for children under five decreased 10% between 2014 and 2015.
- The 10-year trend for San Bernardino County, as well as the state, is gradually downward.
- Congenital defects/chromosomal abnormalities and maternal pregnancy complications affecting the newborn were the most common causes of infant deaths.
- Congenital defects/chromosomal abnormalities and accidents were the leading causes of death for young children (one to four years old).

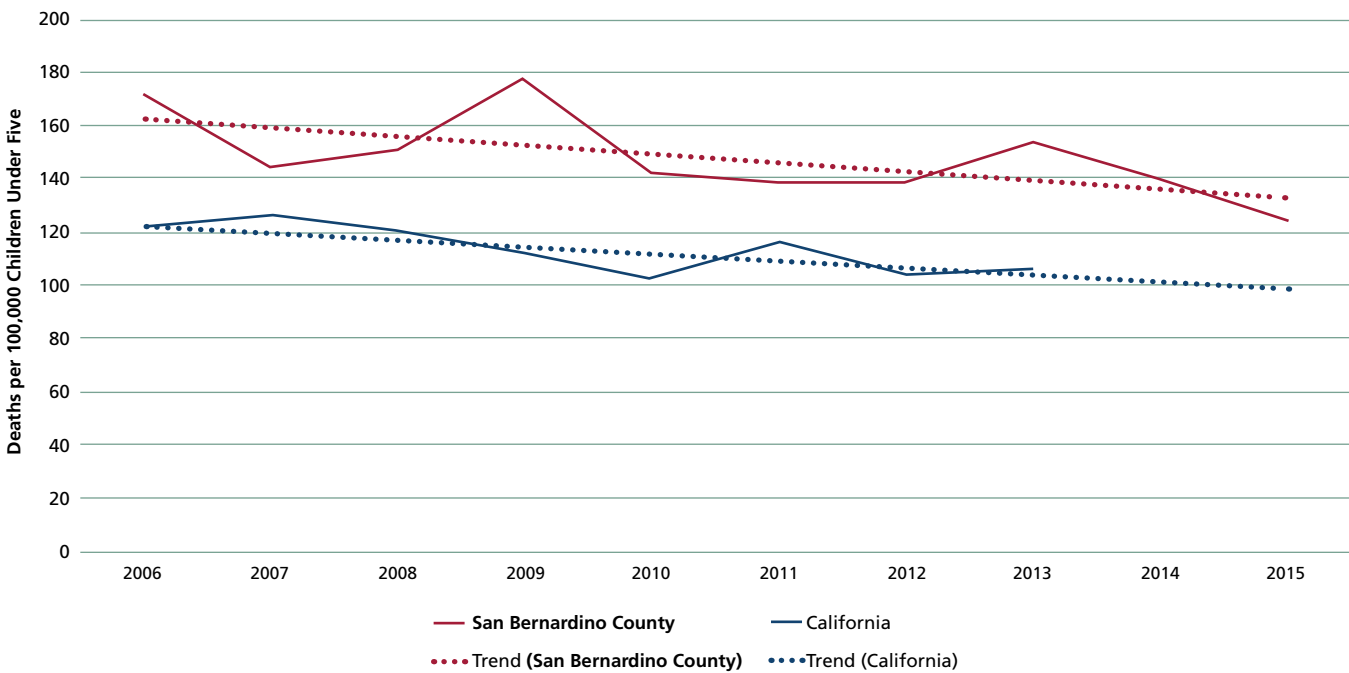
Leading Causes of Death for Infants and Young Children San Bernardino County, 2015*

Cause of Death	Number of Deaths	
	Infants (Under Age One)	Young Children (Ages 1-4)
Congenital Defects/Chromosomal Abnormalities	46	9
Maternal Pregnancy Complications Affecting Newborn	24	9
Prematurity/Low Birth Weight	16	2
Sudden Infant Death Syndrome	5	2
Complications of placenta, cord & membranes	11	2
Accidents (Unintentional Injuries)	4	8
All Other Causes	59	30
TOTAL	165	30

* 2015 cause of death data is considered preliminary. With the exception of accidents, causes with fewer than five deaths for infants and fewer than two deaths for young children are included in "All other causes."

Source: County of San Bernardino, Department of Public Health

Death Rate Due to All Causes for Children Under Five San Bernardino County and California, 2006-2015*



*2013 is the last year that death data are available through CDPH. Thus, California data not available for 2014 and 2015. Cause of death data is considered preliminary for 2015.

Sources: County of San Bernardino, Department of Public Health; California Department of Public Health (CDPH), Center for Health Services, Vital Statistics Query System, California Department of Finance: 2010-2060 - Population Projections by Race/Ethnicity, Detailed Age, & Gender.

Four out of 10 Children are Overweight

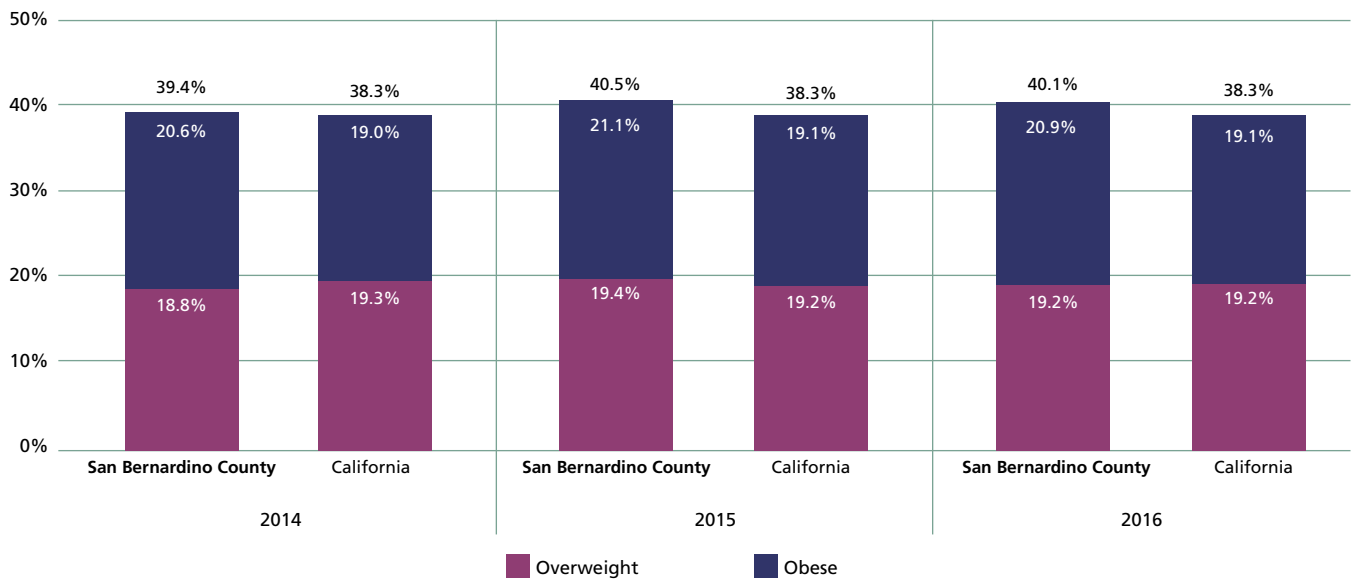
Overweight children are more likely to become overweight or obese adults. A sedentary lifestyle and being overweight are among the primary risk factors for many health problems and premature death. Maintaining a healthy body weight may have positive impacts on physical and mental health, as well as reduce health care costs. This indicator measures the proportion of students in fifth, seventh and ninth grades with an unhealthy body composition (overweight or obese) using the California Department of Education (CDE) Physical Fitness Test. It also measures the weight status of adults.

How is San Bernardino County Doing?

Four out of 10 students in San Bernardino County schools are considered overweight or obese:

- In 2016, an average of 40.1% of San Bernardino County students in the grades tested were overweight or obese (had an unhealthy body composition), compared to 38.3% statewide.
- This is a slight decrease from 2015 when 40.5% of students in San Bernardino County were overweight or obese.
- Of the San Bernardino County students with an unhealthy body composition in 2016, 20.9% were considered to be far outside the healthy range (“Needs Improvement – Health Risk” or obese), while the remaining 19.2% were designated as “Needs Improvement” (overweight).
- San Bernardino City school district had the highest proportion of overweight students (47%).
- Rim of the World school district had the lowest proportion of overweight students (24%).

Percentage of Children Overweight and Obese
San Bernardino County and California, 2014 - 2016



Source: California Department of Education Physical Fitness Test (<http://data1.cde.ca.gov/dataquest/>)

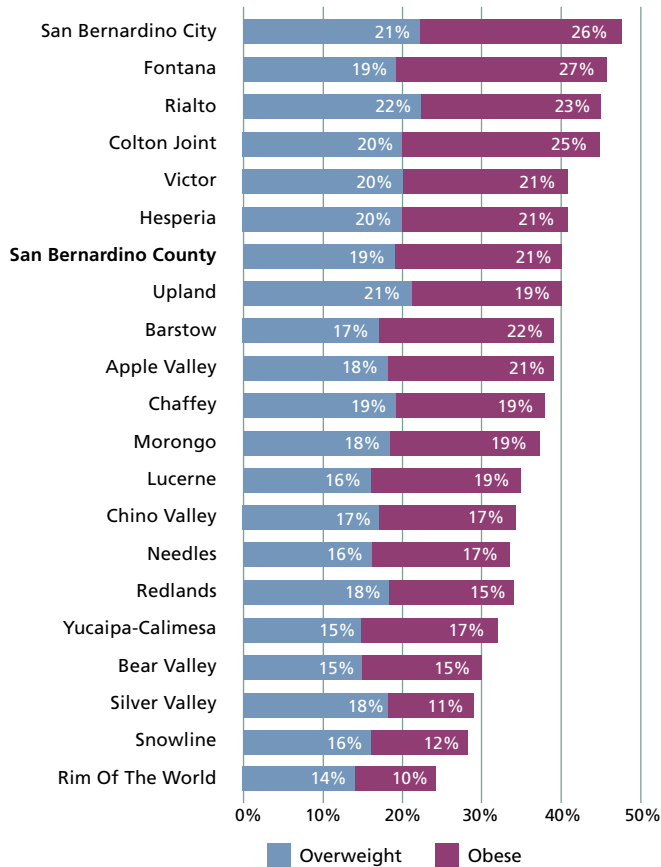
Teen Physical Activity

In 2013 and 2014, only 20.4% of teens in San Bernardino County met the Centers for Disease Control and Prevention (CDC) recommendation of one hour or more of physical activity daily. This is up slightly from 2009, when 19.0% of teens were getting the recommended amount of physical activity.

Source: California Health Interview Survey

¹In 2014, the California Department of Education modified the body composition standards to be more aligned with the Center for Disease Control percentiles to identify lean, normal, overweight, and obese students. The category “Needs Improvement” approximates overweight, while the category “Needs Improvement – Health Risk” approximates obesity.

Percentage of Students with Unhealthy Body Composition by School District
San Bernardino County, 2016



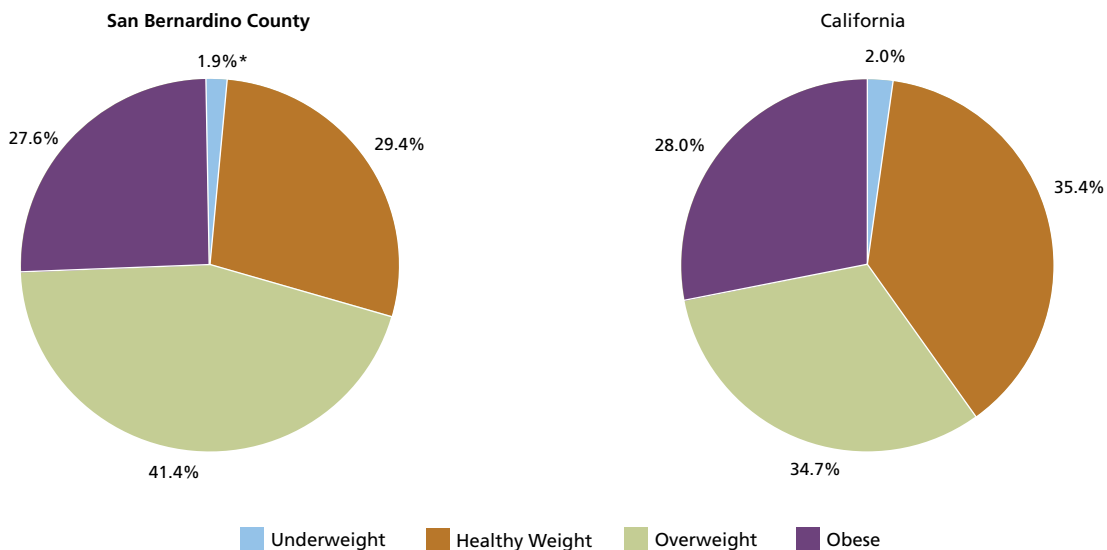
Note: Due to unstable data (fewer than 50 students tested), Baker Valley School District is not included in the chart. Chaffey and Victor represent combined data of the high school districts and their feeder school districts. Chaffey includes Chaffey Joint Union High School District and the elementary districts of Alta Loma, Central, Cucamonga, Etiwanda, Mountain View, Mt. Baldy, and Ontario-Montclair. Victor includes Victor Valley Union High School District and the elementary schools Victor, Adelanto, Oro Grande and Helendale.

Source: California Department of Education Physical Fitness Test (<http://data1.cde.ca.gov/dataquest/>)

More than two-thirds of San Bernardino County adults are overweight:

- In 2015, 41.4% of San Bernardino County adults were considered overweight and 27.6% obese; 29.4% had a healthy body weight.
- In comparison, 35.4% of adults in California had a healthy body weight.

Weight Status of Adults
San Bernardino County and California, 2015



* Data considered unstable and should be interpreted with caution.

Source: University of California, Los Angeles, Center for Health Policy Research, California Health Interview Survey (www.chis.ucla.edu)

Diabetes Prevalence Declines

Chronic diseases – including diabetes, high blood pressure, and cardiovascular (heart disease) – are costly yet largely preventable. Chronic illnesses contribute to approximately 70% of deaths in the United States each year and account for about 75% of the nation’s health-related costs.¹ This indicator reports prevalence and/or death data for heart disease, diabetes, and high blood pressure/stroke. Also tracked are hospitalizations due to heart disease.

How is San Bernardino County Doing?

Both heart disease prevalence and deaths increased in 2015:

- In 2015, San Bernardino County’s death rate due to heart disease was 181.5 age-adjusted deaths per 100,000 residents. This marks a decrease of 31% since 2006, but a one-year increase of 3%.
- There has been an increase in the percentage of county residents who were diagnosed with heart disease – from 5.7% in 2006 to 6.9% in 2015.
- In 2015, San Bernardino County’s prevalence rate for heart disease was in the middle among neighboring counties and slightly higher than the state (6.6%).

The long-term trend for diabetes prevalence and deaths is on the rise:

- In 2015, 10.2% of adults in San Bernardino County had been diagnosed with diabetes. This rate is in the middle among counties compared and higher than California overall (9.8%).
- The rate of 10.2% marks a decline of more than two percentage points from 2014, when diabetes prevalence was 12.5%.
- Long-term, however, diabetes prevalence increased three percentage points since 2006, when the rate was 7.2%.
- At 32.9 age-adjusted deaths per 100,000 residents in 2015, San Bernardino County had the state’s second highest rate of deaths due to diabetes, behind only Kern County.
- Deaths due to diabetes increased slightly from 32.4 in 2014 to 32.9 in 2015. The longer-term trend is also upward, increasing 8% since 2006.

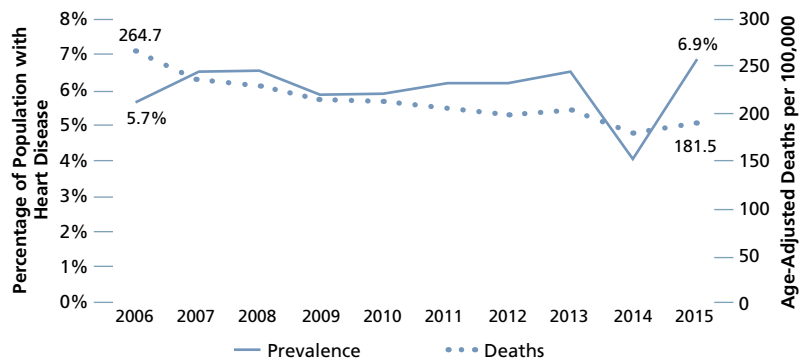
High blood pressure prevalence is on the rise while deaths due to stroke are on the decline:

- In 2015, 30.5% of adults in San Bernardino County had high blood pressure, the highest percentage among all counties compared (except Riverside County) and higher than California.
- This marks an increase of almost six percentage points since 2014, when 24.7% of adults had high blood pressure.
- Of adults diagnosed with high blood pressure, 63% are currently taking medications to control their high blood pressure.
- Deaths due to strokes have decreased 23% since 2006.²

¹ Centers for Disease Control and Prevention (www.cdc.gov/chronicdisease/overview/index.htm)

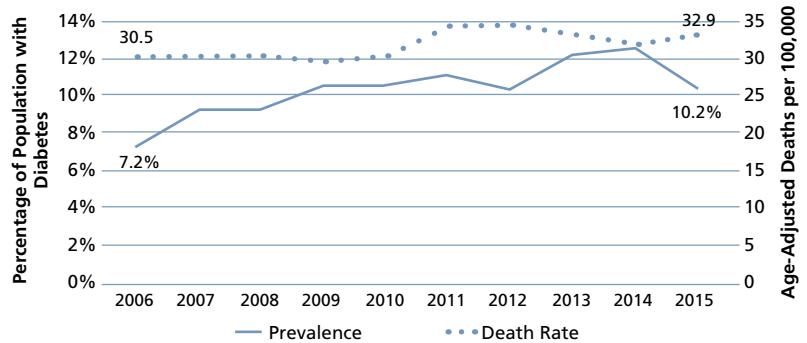
² Fully 70% of strokes can be directly linked to existing high blood pressure, making high blood pressure the single most important controllable stroke risk factor.

Heart Disease: Percentage Ever Diagnosed and Death Rates
San Bernardino County, 2006-2015



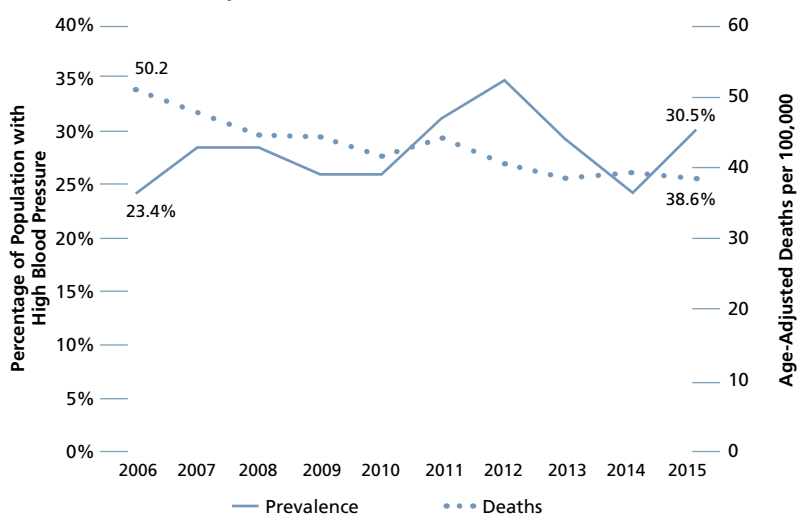
Sources: California Health Interview Survey, Centers for Disease Control and Prevention, National Center for Health Statistics. Underlying Cause of Death 1999-2015 on CDC WONDER Online Database (<http://wonder.cdc.gov/>)

Diabetes: Percentage Ever Diagnosed and Death Rates
San Bernardino County, 2006-2015



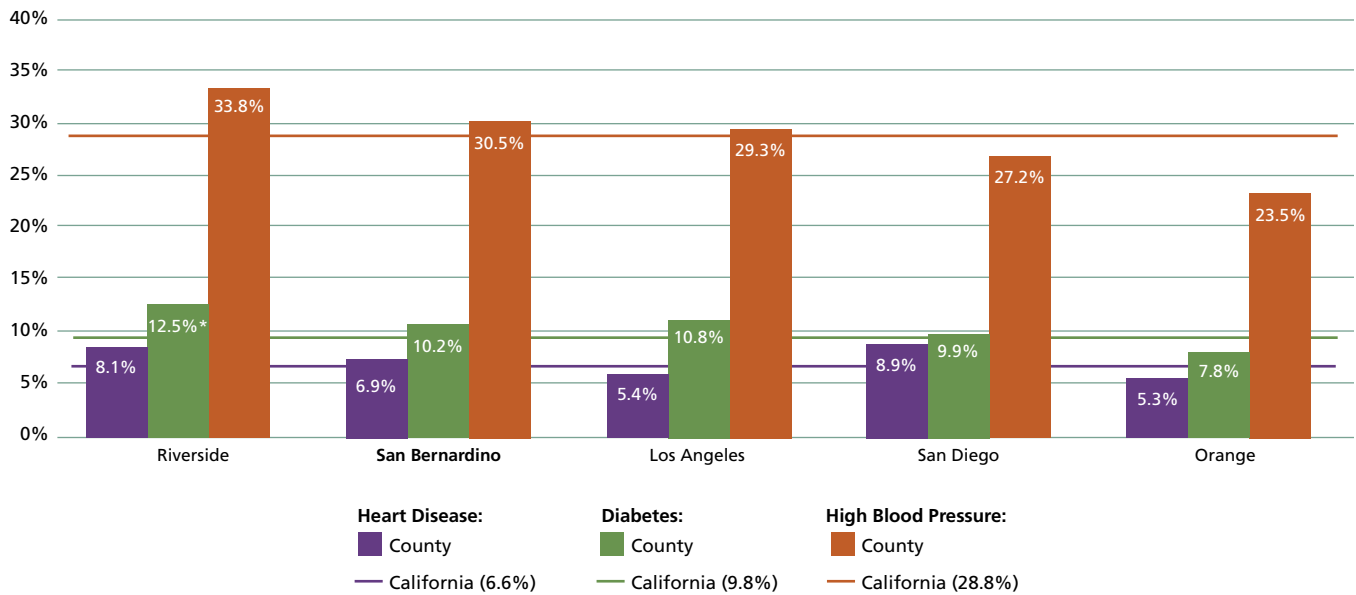
Sources: California Health Interview Survey, California Department of Public Health, County Health Status Profiles (www.cdph.ca.gov/programs/ohir/Pages/CHSP.aspx)

High Blood Pressure: Percentage Ever Diagnosed and Death Rates due to Stroke
San Bernardino County, 2006-2015



Sources: California Health Interview Survey, California Department of Public Health, County Health Status Profiles (<https://www.cdph.ca.gov/Programs/CHSL/Pages/County-Health-Status-Profi.aspx>)

Percentage Ever Diagnosed with Diabetes, High Blood Pressure, or Heart Disease
County Comparison, 2015



* Data considered unstable and should be interpreted with caution.

Source: California Health Interview Survey

Hospitalizations due to Coronary Heart Disease

In 2015, the hospitalization rate for heart disease was 82.4 per 10,000 residents (age-adjusted).

Heart Disease Hospitalizations (Age-Adjusted Rate per 10,000)
San Bernardino County, 2006-2015



Note: This report presents longitudinal data for hospitalizations using 2006-2015 Census (ACS) population estimates. The San Bernardino County Community Transformation Plan also presents data related to heart disease hospitalizations. Because that plan presents a one-year snapshot for 2012, using 2010 Census population, the rates are not directly comparable. In addition, due to a switch in ICD Codes in 2015, estimates for year 2015 are not directly comparable to those for prior years.

Source: California Office of Statewide Health Planning and Development, American Community Survey 1-Year Estimates (2006-2015)

Count of Unserved Lowest in 10 Years

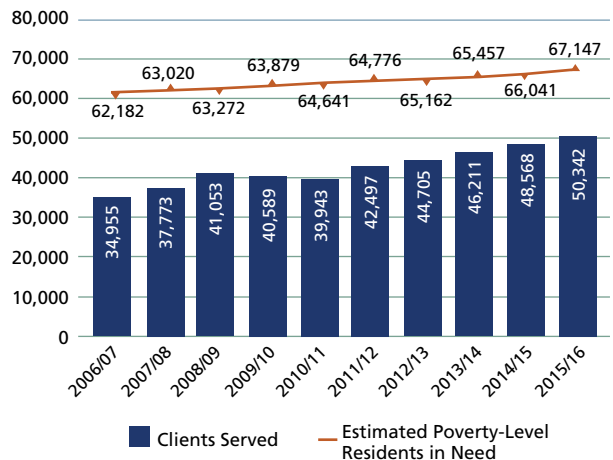
Mental disorders are among the most common causes of disability. According to the National Institute of Mental Health, as many as 4% of adult Americans have a seriously debilitating mental illness, or 9.8 million people. In addition, suicide is the 10th leading cause of death in the United States, accounting for 44,000 deaths nationwide in 2015.¹ This indicator measures the number of poverty-level residents estimated to be in need of mental health services and the number of clients served by publicly-funded county mental health programs.

How is San Bernardino County Doing?

The gap between the need for mental health care and the ability to receive treatment continues to improve:

- In 2015/16, 50,342 clients (unduplicated count)² received public mental health services, while an estimated 67,147 low-income residents were in need of care.
- This marks the lowest gap in 10 years between those in need and those receiving services, shrinking from an estimated gap of 27,227 residents not receiving needed care in 2006/07 to 16,805 in 2015/16.
- Over the past five years, client counts for those receiving public mental health services grew for all age groups. Children ages birth to five have witnessed the largest increase, growing 124% in five years, followed by adults ages 25-44, growing 27%.
- Overall, more than one-third (35%) of clients served in 2015/16 were children and youth ages birth through 17, including 2,923 children ages birth to five (6% of all clients) and 8,562 adolescents (17% of all clients).
- Approximately 12% of all clients receiving public mental health services were young adults between the ages of 18 and 24, while 42% were adults between ages 25 and 54.
- Residents aged 55 and older made up 11% of total clients, including 970 seniors aged 65 and over (2% of total).
- Of the clients served during 2015/16, 38% were Latino/a, 34% were Caucasian, 17% were African American, 3% were Asian/Pacific Islander, 1% was Native American, and 8% were other or unreported.

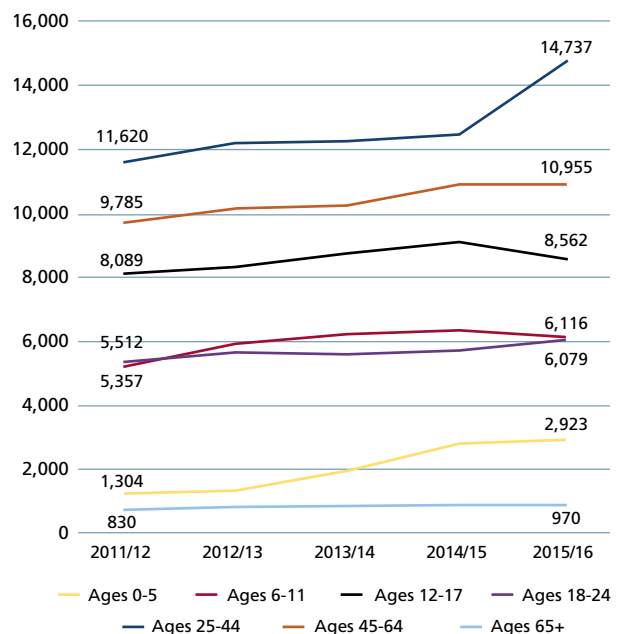
Unduplicated Count of Clients Served by the Public Mental Health System and the Estimated Number of Poverty-Level Residents in Need of Mental Health Services
San Bernardino County, 2007-2016



Note: Residents in need is estimated based on 2007 California Department of Mental Health figures.

Sources: County of San Bernardino, Department of Behavioral Health, Client Services Information System; California Department of Mental Health, Persons in Need Tables

Unduplicated Count of Clients Served by the Public Mental Health System, by Age
San Bernardino County, 2012-2016



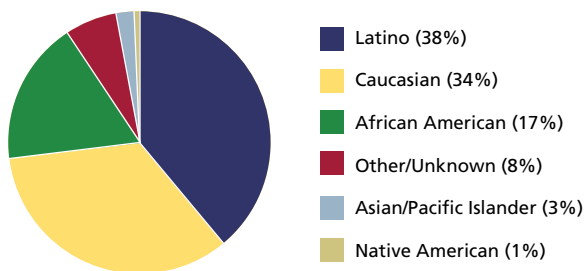
Source: County of San Bernardino, Department of Behavioral Health, Client Services Information System

The Mental Health-Physical Health Connection

Mental health and physical health are closely connected. Mental illnesses, such as depression and anxiety, reduce one's ability to participate in health-promoting behaviors such as eating right, exercising, and minimizing use of alcohol and tobacco. In turn, problems with physical health, such as chronic diseases (see Chronic Disease), can have a serious impact on mental health and decrease a person's ability to participate in treatment and recovery. Mental health and substance abuse also tend to be closely linked (see Substance Abuse).

Source: Healthy People 2020 (www.healthypeople.gov/2020/topicsobjectives2020/overview.aspx?topicid=28)

Unduplicated Count of Clients Receiving Public Mental Health Services, by Race/Ethnicity
San Bernardino County, 2015/16



Source: San Bernardino County Health Care Agency, Behavioral Health Services, Client Services Information System 2015/16

¹ National Institute of Mental Health (www.nimh.nih.gov/health/statistics/prevalence/serious-mental-illness-smi-among-us-adults.shtml); www.nimh.nih.gov/health/statistics/suicide/index.shtml

² An unduplicated count means an individual is counted only once, even though he or she may receive multiple services at multiple times.

Opiate and Alcohol Treatment Admissions Grow

A broad spectrum of public health and safety problems are directly linked to substance abuse, including addiction, traffic accidents, domestic violence, crime, unintended pregnancy, and serious conditions such as cancer, liver disease, HIV/AIDS, and birth defects. Youth who engage in drinking and substance abuse early are more likely to develop alcohol dependence later in life and are more likely to experience changes in brain development that may have life-long effects, including problems with memory and normal growth and development.¹ This indicator presents a variety of commonly-used indicators to help gauge the extent of alcohol and other drug (AOD) abuse in San Bernardino County. These include trends in AOD-related admissions to County treatment facilities, serious (injury or fatal) alcohol-involved auto collisions, and AOD-related deaths.

How is San Bernardino County Doing?

AOD-related treatment continues to grow:

- In 2015/16, AOD-related admissions to County treatment facilities rose 7% in one year, led by increases in admissions for opiate addiction (+27%) and alcohol (+20%).
- Over the past five years, admissions grew 35%.
- 24% of clients receiving AOD services also received County mental health services in 2015/16, while 46% have received mental health services in their lifetimes.²

There were slightly more alcohol-involved accidents in 2016 than the previous year:

- Between 2015 and 2016, alcohol-involved collisions rose 1% compared to a 6% increase statewide.
- In 2016, 11% of serious collisions in San Bernardino County involved alcohol, compared to 10% of collisions statewide.
- Since 2012, alcohol-involved collisions rose 15% in San Bernardino County compared to a 1% increase statewide.
- Alcohol-involved collisions claimed 57 lives in San Bernardino County in 2016.

Over the past 10 years, the rate of drug-induced deaths improved while the rate of alcohol-related deaths worsened:

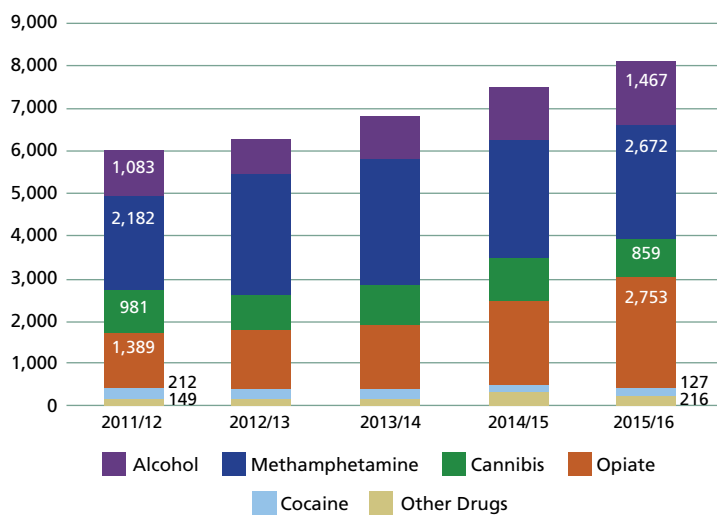
- Drug-induced deaths in San Bernardino County rose between 2012 and 2015, but the 2015 death rate of 10.6 per 100,000 remains an improvement from 10 years ago when there were 11.6 deaths per 100,000 in 2006. The county's 2015 rate is better than the statewide rate of 11.8 per 100,000.
- Deaths caused by chronic liver disease and cirrhosis, which are often associated with substance abuse, have worsened, from 12.5 per 100,000 in 2006 to 15.2 per 100,000 in 2015. The county has more chronic liver disease and cirrhosis deaths than the statewide average (12.1 per 100,000 in 2015).³

Inland Empire Opioid Crisis Coalition

The San Bernardino County Department of Behavioral Health is an active participant in the Inland Empire Opioid Crisis Coalition, which created the Tool Kit for Safe Opioid Prescribing in Emergency Departments. The coalition is now addressing a similar toolkit for primary care physicians. More information on San Bernardino County opioid overdose monitoring can be found at https://pdop.shinyapps.io/ODdash_v1/

Source: County of San Bernardino, Department of Behavioral Health

Alcohol- and Drug-Related Admissions to County-Funded Treatment Services, San Bernardino County, 2012-2016



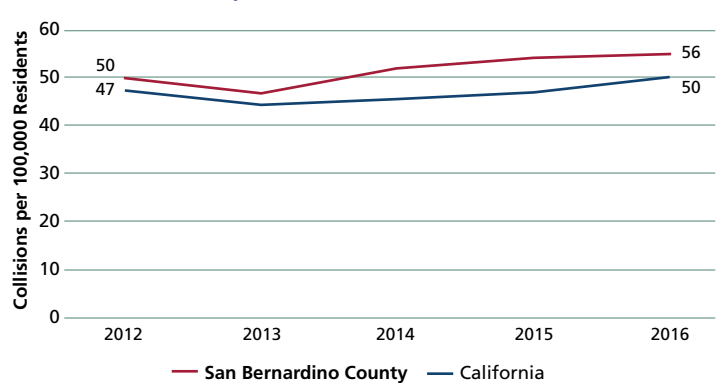
Source: County of San Bernardino, Department of Behavioral Health, CalOMS Dataset

The Mental Health/Substance Abuse Connection

The relationship between mental health and substance dependence is often interconnected. More than 8.9 million people nationally are reported to have both mental health and substance abuse co-occurring disorders. When treated concurrently, treatments are found to be more effective. Treating the whole person improves wellbeing by leading to reductions in addiction relapse, reemergence of psychiatric symptoms, and utilization of crises intervention services.

Source: County of San Bernardino, Department of Behavioral Health

Alcohol-Involved Serious Collisions per 100,000 Residents San Bernardino County and California, 2012-2016



Note: Data have been revised since previously reported.

Sources: California Highway Patrol (<http://iswitrs.chp.ca.gov/Reports/jsp/OTSReports.jsp>); California Department of Finance, Table E-2

¹ Centers for Disease Control and Prevention (www.cdc.gov/alcohol/fact-sheets/underage-drinking.htm)

² San Bernardino County CalOMS dataset

³ California Department of Public Health, County Health Status Profiles (www.cdph.ca.gov/Programs/CHSI/Pages/County-Health-Status-Profiles.aspx)

Veterans Outperform Non-Veterans on Many Measures

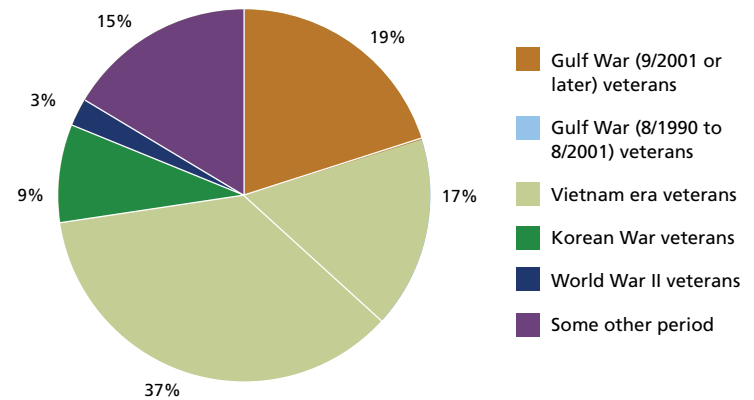
Veterans from all eras reside in San Bernardino County, with needs ranging from aging and adult services to children's services, and from transitional assistance to public health. Strengthening support networks for soldiers and their families may reduce the long-term individual and societal impacts of war. Financial benefits obtained for veterans results in local spending, job creation, and tax revenue. This indicator provides information about veterans in San Bernardino County, including demographic trends, economic and educational outcomes, counts of applications for federal benefits and the County Veterans Affairs (VA) caseload, the value of total and per veteran benefits received, and information on veterans experiencing homelessness.

How is San Bernardino County Doing?

Similar to trends nationwide, the number of veterans living in San Bernardino County is declining:

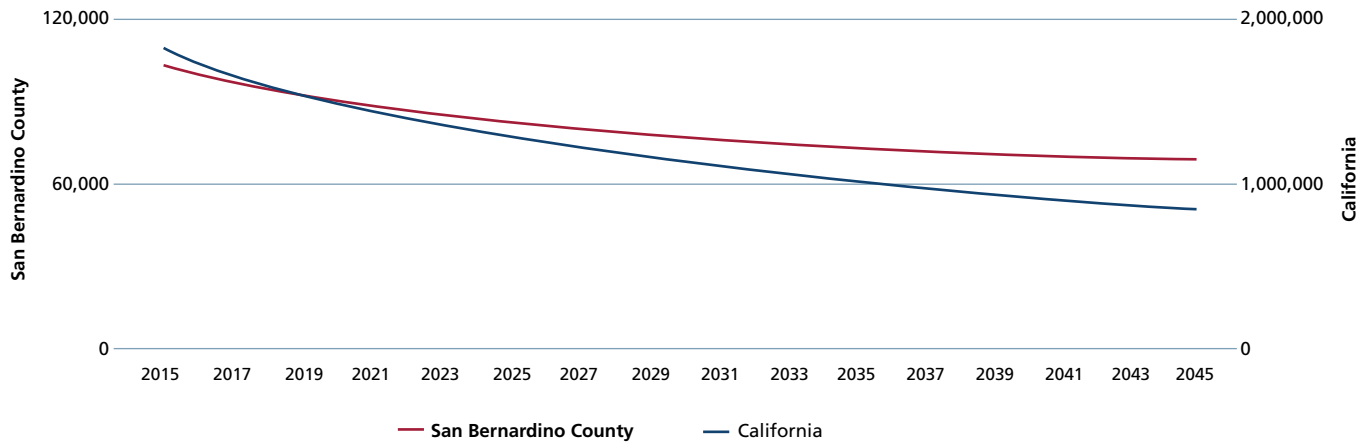
- In 2016, approximately 4.8% of San Bernardino County's population was comprised of veterans.¹
- Between 2015 and 2045, the veteran population in San Bernardino County is projected to decline 36%, from an estimated 104,000 veterans to 64,000. This is a slower decline than statewide, where a 52% decline is anticipated.
- Most San Bernardino County veterans are Vietnam era vets (37%), followed by Gulf War vets (36%).

Period of Service for San Bernardino County Veterans, 2016



Source: U.S. Census Bureau, American Community Survey, 1-Year Estimates, 2016, Table S2101

Projected Change in the Veteran Population San Bernardino County and California, 2015-2045



Source: National Center for Veterans Analysis and Statistics, VetPop2016 County-Level Veteran Population by State, 2015-2045 (www.va.gov/vetdata/Veteran_Population.asp)

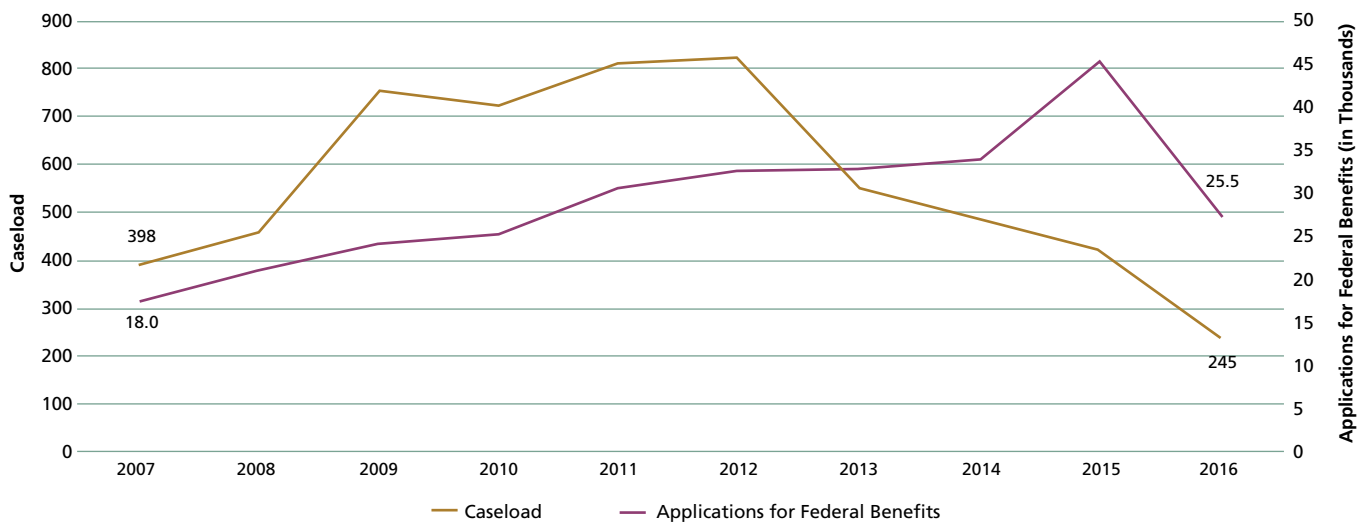
¹ National Center for Veterans Analysis and Statistics, VetPop2016 County-Level Veteran Population by State, 2016; California Department of Finance, Population Estimates, Table E-2, July 2016

² Federal benefits provide disability compensation for veterans injured during active military service, as well as medical/mental health services, educational assistance, vocational rehabilitation, and other services that aid readjustment to civilian life.

While the overall veteran population is decreasing, the number of veterans returning home from active duty is increasing, driving increases in applications for federal benefits:

- Since 2007, applications for federal benefits increased 42%.²
- During the same period, the County VA caseload fell 38%. Recent declines stem from administrative measures to close old and inactive cases.
- In 2015/16, the combined annual value of federal monthly payments and one-time benefits obtained by the County of San Bernardino for veterans was \$54,922,810. This represents a decrease of 11% from the previous year, but 72% more than five-years ago, and outperforms California overall, which posted a five-year increase of 40%.
- The average new award per veteran was \$11,104 in San Bernardino County, which is similar to the statewide average of \$12,231.³

Department of Veterans Affairs Caseload and Applications for Federal Benefits
San Bernardino County, 2007-2016



Source: San Bernardino County Department of Veterans Affairs

Veterans typically fare better on most economic and educational measures:

- San Bernardino County veterans have higher income, lower unemployment, higher educational attainment, and a lower poverty rate compared to non-veterans.
- However, more veterans have a disability (33%) compared to the non-veteran population (13%).

The number of unsheltered homeless veterans increased in 2017:

- According to the 2017 Homeless Count and Sub-population Survey report, there were 111 unsheltered veterans in San Bernardino County – an increase from 2016 when there were 92 unsheltered veterans.
- Out of all unsheltered homeless people in 2017, 10% were veterans and nearly half (46) of the 111 unsheltered homeless veterans were considered “chronically homeless.”⁴
- Additionally, there were 50 veterans living in shelters, or 7% of the total 687 sheltered homeless population in San Bernardino County in 2017.

Selected Characteristics of Veterans Compared to Non-Veterans Ages 18 and Older
San Bernardino County, 2016

	Veterans	Non-Veterans
Median Income	\$39,869	\$24,613
Living in Poverty	10%	15%
Unemployment Rate	4.4%	8.7%
High School Diploma or Higher	93%	78%
Bachelor's Degree or Higher	23%	20%
With a Disability	33%	13%

Source: U.S. Census Bureau, American Community Survey, 1-Year Estimates, 2016, Table S2101

³ California Association of Veterans Service Officers, Annual Reports and Directories, 2017 and 2013

⁴ A person is identified as chronically homeless if they have experienced homelessness four or more times within the past three years and they have a disabling condition, such as mental illness or a substance abuse problem.

Children Placed with Siblings Highest Among Areas Compared

Foster care placement is often the final act to protect children from abuse and neglect after attempts have been made to stabilize their families. In order to lessen the trauma associated with being removed from their parents, the goal is to place children with people who are familiar to them, such as relatives, extended family members and/or their siblings whenever possible. These placements not only promote emotional wellbeing, they also maintain family connections and the cultural and familial rituals to which the children are accustomed. This indicator tracks confirmed child abuse and neglect reports (substantiated allegations), the number of children entering foster care, and the percentage of children maintaining their family connections while in foster care.

How is San Bernardino County Doing?

Child abuse and neglect reports for San Bernardino County continue to increase:

- In 2016, San Bernardino County had 9.3 substantiated child abuse and neglect allegations per 1,000 children, the highest rate among neighboring counties compared, except for Los Angeles County.
- For children from birth through age five, the rate of substantiated referrals is 13.4 per 1,000 children, compared with California's rate of 11.2 per 1,000 children.
- Between 2015 and 2016, there was a 1% rise in the number of substantiated child abuse and neglect reports, from 5,136 to 5,230 reports, respectively.

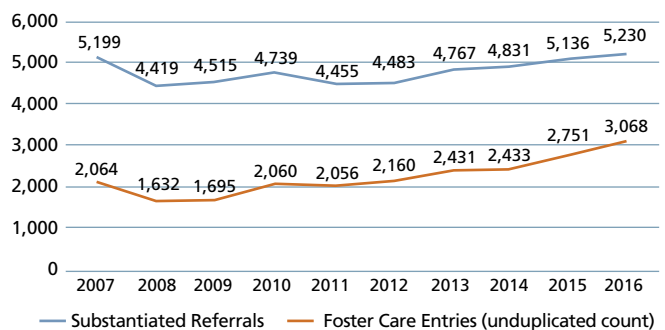
There was also an increase in the number of children entering the foster care system:

- In 2016, there were 3,068 children entering foster care, up 12% from 2015 when 2,751 children entered foster care.
- When looking at the relationship between substantiated allegations and foster care placement, 59% of substantiated allegations in San Bernardino County resulted in foster care placement, a much higher proportion than the state and all counties compared.
- San Bernardino County's rate of children entering foster care (5.5 per 1,000 children) is greater than the statewide average of 3.3 per 1,000 children and all other counties compared.
- The rate of foster care entry is higher for children from birth through age five (8.7 per 1,000 children). California's rate for children birth through age five entering foster care is 5.1 per 1,000 children.

The number of children placed with relatives has remained steady:

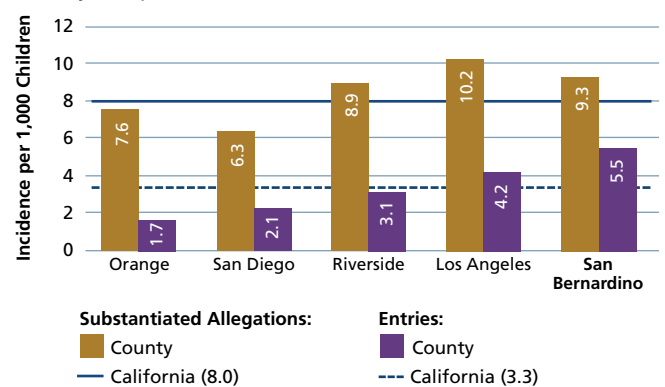
- According to a point-in-time count on January 1, 2017, 36.6% of the children in foster care were placed with relatives, compared with 36.8% in 2016.
- San Bernardino County has the lowest rate of placement with relatives among all neighboring counties compared except Riverside County (33.6%).
- Compared to the state as a whole, San Bernardino County places children with their siblings at a higher rate. In San Bernardino County, 76.1% of the children in foster care were placed with at least some of their siblings and 51.0% of the children were placed with all siblings (compared with the state placement rates of 70.8% and 49.6%, respectively). San Bernardino County's placement with siblings ranks highest among neighboring counties.

Substantiated Referrals and Foster Care Entries
San Bernardino County, 2007-2016



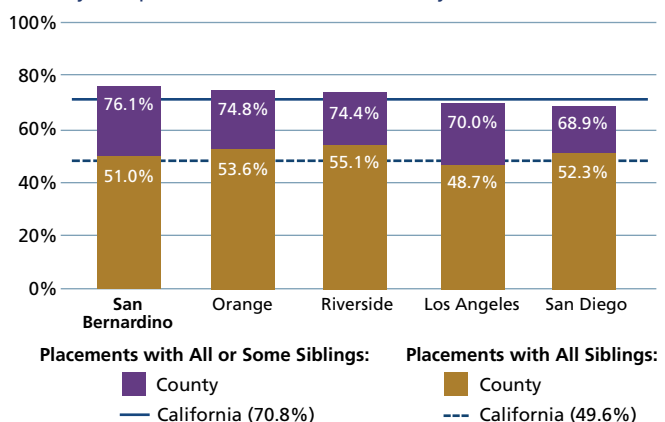
Source: University of California Berkeley, Center for Social Services Research, Child Welfare Research Center (http://cssr.berkeley.edu/ucb_childwelfare/default.aspx)

Substantiated Referrals and Foster Care Entries
County Comparison, 2016



Source: University of California Berkeley, Center for Social Services Research, Child Welfare Research Center (http://cssr.berkeley.edu/ucb_childwelfare/default.aspx)

Foster Youth Placed with Some or All Siblings
County Comparison and California, January 2017



Source: University of California Berkeley, Center for Social Services Research, Child Welfare Research Center (http://cssr.berkeley.edu/ucb_childwelfare/default.aspx)